F :0			
	in this information to identify your case: tor 1		
	First Name Middle Name Last Name		
	tor 2 use if, filing) First Name Middle Name Last Name		
Unit	ed States Bankruptcy Court for the: SOUTHERN DISTRICT OF MISSISSIPPI		
Cas	e number		
(if kno		_	c if this is an ded filing
		amon	aca ming
∩ff	icial Form 106Sum		
	mmary of Your Assets and Liabilities and Certain Statistical Information		12/15
Be a infor your	s complete and accurate as possible. If two married people are filing together, both are equally responsible for mation. Fill out all of your schedules first; then complete the information on this form. If you are filing amendoriginal forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Part	1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	41,276.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	41,276.00
Part	2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	28,894.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	\$	103,934.95
	Your total liabilities	\$	132,828.95
Part	3: Summarize Your Income and Expenses	1	
4.	Schedule I: Your Income (Official Form 106I)		
٠.	Copy your combined monthly income from line 12 of Schedule I	\$	6,210.20
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	6,174.20
Part	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this the court with your other schedules.	box and s	ubmit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

19-50474-KMS Dkt 3 Filed 03/13/19 Entered 03/13/19 16:13:17 Page 2 of 52

Debtor 1 Jasmine D. Smith Case number (if known) From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form

122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

5,881.74 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total claim	1
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Fill in th	is inform	ation to identify your	case and this	filing				
Debtor 1				illing.				
Deploi		Jasmine D. Smith	n Middle N	ame	Last Name			
Debtor 2		First Name	Middle N		Lost Nome			
(Spouse, if		First Name			Last Name			
United S	tates Ban	kruptcy Court for the:	SOUTHERN	DISTRICT OF M	MISSISSIPPI			
Case nu	mber							Check if this is an
								amended filing
Officia	al For	m 106A/B						
Sche	edule	A/B: Prop	ertv					12/15
think it fits informatio Answer ev	s best. Be on. If more very questi	as complete and accura space is needed, attach on.	ate as possible. a separate she	If two married pe et to this form. Or	If an asset fits in more than one opple are filing together, both and the top of any additional pages. If Own or Have an Interest In	are equally responsible	for supply	ing correct
		<u> </u>	<u></u>		ling, land, or similar property?	,		
1. Do you	OWII OF III	ve any legal of equitable	e interest in any	residence, build	ing, iand, or similar property?			
No.	Go to Part	2.						
☐ Yes.	Where is	the property?						
Part 2:	Describe Y	our Vehicles						
3. Cars, ☐ No ■ Yes	·	cks, tractors, sport u	tility vehicles,	motorcycles				
3.1 M	_{ake:} J	еер	Who	has an interest i	n the property? Check one	Do not deduct sec	ured claims	or exemptions. Put
		rand Cherokee		ebtor 1 only	in the property : offections			aims on Schedule D: Secured by Property.
		017		ebtor 2 only		Current value of		urrent value of the
	oproximate			ebtor 1 and Debto	r 2 only	entire property?		ortion you own?
O1	ther informa	ation:	DA	t least one of the o	debtors and another			
				Check if this is consee instructions)	mmunity property	\$24,176	-00	\$24,176.00
■ No □ Yes 5 Add to page:	oles: Boats the dollar s you hav	, trailers, motors, persons trailers, motors, persons trailers, motors, persons, trailers, motors, persons, trailers, motors, persons, per	onal watercraft you own for a . Write that nu	t, fishing vessels	ehicles, other vehicles, and, snowmobiles, motorcycle and states from Part 2, including and	accessories ny entries for	port	\$24,176.00 rent value of the ion you own? not deduct secured
e Hener	shold ac-	de and furnishings					clair	ns or exemptions.
ხ. ოous e	≠noia god	ds and furnishings						

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

19-50474-KMS Dkt 3 Filed 03/13/19 Entered 03/13/19 16:13:17 Page 4 of 52

De	btor 1	Jasmine D.	Smith	Case number	(if known)
	Yes.	Describe			
			Household goods and furnishings		\$200.00
	□No	es: Televisions a	and radios; audio, video, stereo, and digital eq I phones, cameras, media players, games	uipment; computers, printers, scanners	; music collections; electronic devices
			TVs and electronics		\$300.00
	Example ■ No		I figurines; paintings, prints, or other artwork; ons, memorabilia, collectibles	oooks, pictures, or other art objects; sta	mp, coin, or baseball card collections;
	Example No	ent for sports a es: Sports, photo musical instr	ographic, exercise, and other hobby equipmer	nt; bicycles, pool tables, golf clubs, skis	canoes and kayaks; carpentry tools;
10.	Firearm Examp ■ No	ns	s, shotguns, ammunition, and related equipm	ent	
	□ No ·		othes, furs, leather coats, designer wear, sho	es, accessories	
			Clothes and personal items		\$200.00
	□ No		welry, costume jewelry, engagement rings, w Misc jewelry	edding rings, heirloom jewelry, watches	s, gems, gold, silver
	Examp ■ No	rm animals oles: Dogs, cats,	birds, horses		
	■ No	her personal an	d household items you did not already list formation	i, including any health aids you did r	ot list
15			of all of your entries from Part 3, including number here		st,700.00_

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured

19-50474-KMS Dkt 3 Filed 03/13/19 Entered 03/13/19 16:13:17 Page 5 of 52

Debto	or 1 <u>J</u>	asmine D.	Smith		Cas	se number <i>(if known</i>)
							claims or exemptions.
	xamples No			our wallet, in your home,	n a safe deposit box, and on hand whe	n you file your peti	tion
						Cash	\$100.00
_E					certificates of deposit; shares in credit the same institution, list each.	unions, brokerage	houses, and other similar
_					Institution name:		
			17.1.	Checking and Savings Account	Chase Bank Account No: xxx4787		\$100.00
			17.2.	Checking and Savigns Account	Navy Federal Credit Union Account No: xxxx6463		\$200.00
E	,	: Bond funds		ly traded stocks ent accounts with brokera	ge firms, money market accounts		
19. N o	on-publi	cly traded s	stock and		d and unincorporated businesses, i	ncluding an intere	est in an LLC, partnership, and
	oint vent No	ure					
	Yes. Giv	ve specific ir		about them ne of entity:	%	of ownership:	
_^	legotiabl Ion-nego	e instrument	ts include p	ersonal checks, cashiers	e and non-negotiable instruments ' checks, promissory notes, and money to someone by signing or delivering the		
	No Yes. Giv	e specific in		about them uer name:			
E		nt or pensio :: Interests in		-), thrift savings accounts, or other pens	ion or profit-sharinç	g plans
		each accou		ely. of account:	Institution name:		
Y E	our shar xamples		ed deposit	s you have made so that	you may continue service or use from a utilities (electric, gas, water), telecom		anies, or others
					Institution name or individual:		
		(A contract	for a perio	dic payment of money to	you, either for life or for a number of ye	ars)	
	No Yes	1	ssuer nam	e and description.			
	U.S.C. §			n an account in a qualifi and 529(b)(1).	ed ABLE program, or under a qualifi	ed state tuition p	rogram.
_	Yes	І	nstitution r	name and description. Se	parately file the records of any interests	s.11 U.S.C. § 521(c	s):
25. T r		uitable or f	uture inte	rests in property (other	than anything listed in line 1), and ri	ghts or powers ex	xercisable for your benefit

19-50474-KMS Dkt 3 Filed 03/13/19 Entered 03/13/19 16:13:17 Page 6 of 52

Debte	or 1 Jasmine D. Smith		C	ase number <i>(if known)</i>	
	Yes. Give specific information	about them			
26. P	atents, copyrights, trademark	s, trade secrets, and other intellectues, websites, proceeds from royalties a		s	
_	No Yes. Give specific information	about them			
	· · · · · · · · · · · · · · · · · · ·	r general intangibles usive licenses, cooperative associatio	n holdings, liquor license	es, professional licenses	
_	No Yes. Give specific information	about them			
Mone	ey or property owed to you?			p C	Current value of the cortion you own? On not deduct secured laims or exemptions.
	ax refunds owed to you No Yes. Give specific information a	about them, including whether you alre	eady filed the returns and		aling of exemptions.
		2018		Federal Income Tax Refund	\$5,000.00
		2018		Earned Income Tax Credit	\$5,000.00
				Otata Incomo Tan	
		2018		State Income Tax Refund	\$5,000.00
30. O	No Yes. Give specific information Other amounts someone owes Examples: Unpaid wages, disabi	you lity insurance payments, disability ben s you made to someone else		., ,	
Ε		fe insurance; health savings account ((HSA); credit, homeowne	er's, or renter's insurance	
		pany of each policy and list its value. npany name:	Beneficiary	r.	Surrender or refund value:
lf s		due you from someone who has die ng trust, expect proceeds from a life ir		urrently entitled to receive pr	operty because
E		nether or not you have filed a lawsunt disputes, insurance claims, or rights.		or payment	

Debtor	r 1	Jasmine D. Smith		Case number (if known)	
34. Oti		contingent and unliquidated claims of every nature, inclu	ding counterclaims	of the debtor and rights to set	off claims
	Yes.	Describe each claim			
35. An	-	ancial assets you did not already list			
	Yes.	Give specific information			
		he dollar value of all of your entries from Part 4, including art 4. Write that number here			\$15,400.00
Part 5:	Des	scribe Any Business-Related Property You Own or Have an Intere	est In. List any real esta	ate in Part 1.	
37. Do y	you c	own or have any legal or equitable interest in any business-relate	ed property?		
■ No	o. Go	to Part 6.			
□ Ye	es. G	so to line 38.			
Part 6:		scribe Any Farm- and Commercial Fishing-Related Property You ou own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. Do	you	own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
_	-	Go to Part 7.			
	l Yes.	Go to line 47.			
Part 7:		Describe All Property You Own or Have an Interest in That You	Did Not List Above		
Ex	xamp	have other property of any kind you did not already list? oles: Season tickets, country club membership	•		
		O'con and all fine in formation			
ЦΥ	res.	Give specific information			
54. A	\dd t	he dollar value of all of your entries from Part 7. Write tha	at number here		\$0.00
Part 8:		List the Totals of Each Part of this Form			
		: Total real estate, line 2			* 0.00
		: Total real estate, line 2		-	\$0.00
		3: Total vericles, line 5	\$24,176.00 \$1,700.00		
		: Total financial assets, line 36	\$15,400.00		
		: Total business-related property, line 45	\$0.00		
		: Total farm- and fishing-related property, line 52	\$0.00		
		': Total other property not listed, line 54 +	\$0.00		
62. T	otal	personal property. Add lines 56 through 61	\$41,276.00	Copy personal property total	\$41,276.00
63. T	otal	of all property on Schedule A/B. Add line 55 + line 62			\$41,276.00
				_	

Fil	l in this inforn	nation to identify your o	ase:						
	btor 1	Jasmine D. Smith				•			
		First Name	Middle Name	La	ast Name				
	btor 2 ouse if, filing)	First Name	Middle Name	L	ast Name				
Un	ited States Ba	nkruptcy Court for the:	SOUTHERN DISTRICT OF	MISSI	SSIPPI				
		rinapiey Court for the.							
	nown)					☐ Check if this is an amended filing			
~ .	κ: α:α! ⊏α	**** 40CC							
		<u>rm 106C</u>		_	_				
<u>S</u>	chedul	e C: The Pro	perty You Cla	<u>aim</u>	as Exempt	4/16			
he nee cas	property you li ded, fill out an e number (if kr	isted on <i>Schedule A/B: Pi</i> d attach to this page as n nown).	roperty (Official Form 106A/B) nany copies of <i>Part 2: Addition</i>) as yo nal Pa	ur source, list the property that you ge as necessary. On the top of any	additional pages, write your name and			
spe any un exe	ecific dollar ar applicable st ds—may be u emption to a p	nount as exempt. Alterr tatutory limit. Some exe inlimited in dollar amou	natively, you may claim the f mptions—such as those for nt. However, if you claim an	full fai r healt n exem	r market value of the property be h aids, rights to receive certain b option of 100% of fair market valu	One way of doing so is to state a sing exempted up to the amount of penefits, and tax-exempt retirement ue under a law that limits the t, your exemption would be limited			
Pa	rt 1: Identii	fy the Property You Clai	m as Exempt						
1.	Which set of	exemptions are you cla	aiming? Check one only, eve	n if yo	ur spouse is filing with you.				
	☐ You are cl	aiming state and federal i	nonbankruptcy exemptions.	11 U.S	s.C. § 522(b)(3)				
	You are cl	aiming federal exemption	s. 11 U.S.C. § 522(b)(2)						
2.		For any property you list on <i>Schedule A/B</i> that you claim as exempt, fill in the information below.							
		ion of the property and line	•	• •	ount of the exemption you claim	Specific laws that allow exemption			
		that lists this property	portion you own Copy the value from Schedule A/B	Check only one box for each exemption.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
		goods and furnishin	gs \$200.00		\$200.00	44 11 0 0 6 522(4)(2)			
	Line from Sci	hedule A/B: 6.1		_		11 U.S.C. § 522(d)(3)			
					100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)			
	TVs and ele		\$300.00			11 U.S.C. § 522(d)(3)			
		ectronics hedule A/B: 7.1	\$300.00	•	any applicable statutory limit				
	Line from Sci	hedule A/B: 7.1 d personal items	\$300.00 \$200.00		\$300.00 \$100% of fair market value, up to				
	Line from Sci	hedule A/B: 7.1			\$300.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)			
	Clothes and Line from Scale	thedule A/B: 7.1 d personal items thedule A/B: 11.1		• •	\$300.00 100% of fair market value, up to any applicable statutory limit \$200.00 100% of fair market value, up to	11 U.S.C. § 522(d)(3)			
	Clothes and Line from Scale	hedule A/B: 7.1 d personal items hedule A/B: 11.1	\$200.00	• •	\$300.00 100% of fair market value, up to any applicable statutory limit \$200.00 100% of fair market value, up to any applicable statutory limit \$1,000.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3) 11 U.S.C. § 522(d)(3)			
	Clothes and Line from Scale	thedule A/B: 7.1 d personal items thedule A/B: 11.1	\$200.00		\$300.00 100% of fair market value, up to any applicable statutory limit \$200.00 100% of fair market value, up to any applicable statutory limit \$1,000.00	11 U.S.C. § 522(d)(3) 11 U.S.C. § 522(d)(3)			

19-50474-KMS Dkt 3 Filed 03/13/19 Entered 03/13/19 16:13:17 Page 9 of 52

De	ebtor 1	Jasmine D. Smith	Case number (if known)	
3.	•	you claiming a homestead exemption of more than \$160,375? ect to adjustment on 4/01/19 and every 3 years after that for cases filed on or	after the date of adjustment.)	
		No		
		Yes. Did you acquire the property covered by the exemption within 1,215 day ☐ No	s before you filed this case?	
		□ Yes		

		ır case:			
Debtor 1	Jasmine D. Smi	th Middle Name Last Name			
Debtor 2	riistivanie	Middle Name Last Name			
(Spouse if, filing)	First Name	Middle Name Last Name			
United States Bank	ruptcy Court for the	SOUTHERN DISTRICT OF MISSISSIPPI			
Case number					
(if known)				_	if this is an
				amend	led filing
Official Form	106D				
Schedule D	: Creditors	Who Have Claims Secured	by Property	у	12/15
		If two married people are filing together, both are equout, number the entries, and attach it to this form. Or			
1. Do any creditors ha	ave claims secured b	y your property?			
□ No. Check the property of the property o	nis box and submit t	his form to the court with your other schedules. Yo	ou have nothing else t	o report on this form.	
Yes. Fill in a	II of the information	below.			
Part 1: List All S	Secured Claims				
		more than one secured claim, list the creditor separately	Column A	Column B	Column C
		a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Navy Feder	al Credit Un	Describe the property that secures the claim:	\$28,894.00	\$24,176.00	\$4,718.00
Creditor's Name		2017 Jeep Grand Cherokee 32,001 miles			
POB 3700 Merrifield, \	/A 22119	As of the date you file, the claim is: Check all that apply. ☐ Contingent			
Number, Street, C	ity, State & Zip Code	☐ Unliquidated			
	3 Oh a alla a a	☐ Disputed			
Who owes the debt	r Cneck one.	Nature of lien. Check all that apply.			
Debtor 1 only	r Check one.	Nature of lien. Check all that apply. An agreement you made (such as mortgage or sec car loan)	ured		
☐ Debtor 1 only ☐ Debtor 2 only		An agreement you made (such as mortgage or sec car loan)	ured		
Debtor 1 only	or 2 only	☐ An agreement you made (such as mortgage or sec	ured		
☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debt	or 2 only debtors and another n relates to a	□ An agreement you made (such as mortgage or sec car loan) □ Statutory lien (such as tax lien, mechanic's lien)	ured		
☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debt ☐ At least one of the ☐ Check if this clain	or 2 only debtors and another n relates to a	□ An agreement you made (such as mortgage or sec car loan) □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit	ured		
☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debt ☐ At least one of the ☐ Check if this clair community debt Date debt was incurr	or 2 only debtors and another n relates to a	□ An agreement you made (such as mortgage or seccar loan) □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit ■ Other (including a right to offset) □ Auto Lien Last 4 digits of account number			
Debtor 1 only Debtor 2 only Debtor 1 and Debt At least one of the Check if this clair community debt Date debt was incurr	or 2 only debtors and another n relates to a ed 8/2017 e of your entries in C	□ An agreement you made (such as mortgage or seccar loan) □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit ■ Other (including a right to offset) Last 4 digits of account number olumn A on this page. Write that number here:	ured \$28,89	4.00	
Debtor 1 only Debtor 2 only Debtor 1 and Debt At least one of the Check if this clair community debt Date debt was incurr	or 2 only debtors and another n relates to a red 8/2017 e of your entries in Coge of your form, add	□ An agreement you made (such as mortgage or seccar loan) □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit ■ Other (including a right to offset) □ Auto Lien Last 4 digits of account number			

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in this i	nformation to identify your o	ase:			
Debtor 1	Jasmine D. Smith				
	First Name	Middle Name	Last Name		
Debtor 2	First Name	Middle None	Look Nama		
(Spouse if, filing) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	SOUTHERN DIS	TRICT OF MISSISSIPPI		
Case numbe	er				
(if known)				☐ Check if this	is an
				amended filir	ng
Official E	Form 106E/E				
	Form 106E/F	ha Hawa Ha	annum d Claima	4.0)/4 E
	e E/F: Creditors W		SECURED CIAIMS with PRIORITY claims and Part 2 for creditors with NONI		2/15
Schedule D: C left. Attach the name and cas	Creditors Who Have Claims Secu e Continuation Page to this page se number (if known).	ured by Property. If n e. If you have no info	Form 106G). Do not include any creditors with partially so nore space is needed, copy the Part you need, fill it out, no ormation to report in a Part, do not file that Part. On the to	umber the entries in the b	oxes on the
	ist All of Your PRIORITY Un		•		
_ ′	reditors have priority unsecured	i ciaims against you			
	o to Part 2.				
Yes.	to All of Vous MONDBIODIT	V 11 1 Ol!-			
	ist All of Your NONPRIORIT				
3. Do any c	reditors have nonpriority unsec	ured claims against	you?		
∐ No. Y	ou have nothing to report in this pa	art. Submit this form to	o the court with your other schedules.		
Yes.					
unsecure	d claim, list the creditor separately	for each claim. For each	ical order of the creditor who holds each claim. If a credito ach claim listed, identify what type of claim it is. Do not list cla n Part 3.If you have more than three nonpriority unsecured cla	ims already included in Part	1. If more
				Total claim	n
4.1 Am	eren Missouri	Last	4 digits of account number		\$100.06
	priority Creditor's Name B 88068	Whor	n was the debt incurred?		
	cago, IL 60680	WIIGI	was the debt incurred?		
Num	ber Street City State Zip Code	As of	f the date you file, the claim is: Check all that apply		
Who	incurred the debt? Check one.				
	Debtor 1 only	□ co	ontingent		
	Debtor 2 only	□ Uı	nliquidated		
	Debtor 1 and Debtor 2 only	☐ Di	isputed		
	At least one of the debtors and and	ther Type	of NONPRIORITY unsecured claim:		
	Check if this claim is for a comn	iunity	tudent loans		
debt Is th	t e claim subject to offset?		bligations arising out of a separation agreement or divorce that t as priority claims	it you did not	
	•	<u></u>	t as priority claims ebts to pension or profit-sharing plans, and other similar debts		
- №				•	
ЦΥ	U S	■ O:	ther. Specify		

Debto	Jasmine D. Smith	Case number (if known)	
4.2	Capital One	Last 4 digits of account number	\$796.00
	Nonpriority Creditor's Name POB 85015	When was the debt incurred? 4/2017	
	Richmond, VA 23285 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card	
4.3	Capital One	Last 4 digits of account number	\$510.00
	Nonpriority Creditor's Name POB 30281	When was the debt incurred? 6/2016	
	Salt Lake Cit, UT 84130 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit Card	
4.4	CCS Collections	Last 4 digits of account number	\$90.00
	Nonpriority Creditor's Name 725 Canton St	When was the debt incurred? 9/2017	
	Norwood, MA 02062 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Положения	
	Debtor 2 only	☐ Contingent ☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ At least one or the deptors and another ☐ Check if this claim is for a community	Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	■ No	Collection account for Frontier	
	Yes	Other. Specify Communications Inc	

Debto	Jasmine D. Smith	Case number (if known)			
4.5	Chase	Last 4 digits of account number	\$474.00		
	Nonpriority Creditor's Name POB 15123	When was the debt incurred? 12/2011	<u> </u>		
	Wilmington, DE 19850 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	■ Other. Specify			
4.6	Credit One Bank	Last 4 digits of account number	\$1,066.00		
	Nonpriority Creditor's Name POB 98873	When was the debt incurred? 4/2017			
	Las Vegas, NV 89193 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	,			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify Credit Card			
4.7	Creditors Discount Nonpriority Creditor's Name	Last 4 digits of account number	\$812.00		
	POB 213 Streator, IL 61364	When was the debt incurred?			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	\square Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	Other Specify Collection accounts			

Debto	or 1 Jasmine D. Smith	Case number (if known)			
4.8	Dept of Ed/Navient	Last 4 digits of account number	\$75,685.00		
	Nonpriority Creditor's Name	When we the debt in sure do			
	POB 9635	When was the debt incurred?			
	Wilkes Barre, PA 18773 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	•				
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	\square Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	No	\square Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify Student Loans			
4.9	Diversified Consultant	Last 4 digits of account number	\$762.00		
	Nonpriority Creditor's Name 10550 Deerwood Park Bl Jacksonville, FL 32256	When was the debt incurred? 10/2018			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	<u> </u>				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify Collection account for DirectTV			
4.1	Equifax Credit Informa		\$0.00		
0	Nonpriority Creditor's Name	Last 4 digits of account number	φυ.υυ		
	POB 105252	When was the debt incurred?			
	Atlanta, GA 30378				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	<u></u>	☐ Student loans			
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	□ Yes	Other Seedify Notice only			
	LL TES	(Athor Specify NULICE UIIIV			

Debtor	1 Jasmine D. Smith	Case number (if known)			
4.1					
1	Experian	Last 4 digits of account number	\$0.00		
	Nonpriority Creditor's Name	When was the debt incurred?			
	POB 2002 Allen, TX 75013	when was the debt incurred?			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	Other. Specify Notice only			
4.1	IC System		\$192.00		
2	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ102.00		
	POB 64378	When was the debt incurred?			
	Saint Paul, MN 55164				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only				
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	Student loans			
	debt	Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify Collection account			
4.1	Kay Jewelers	Last 4 digits of account number	\$964.00		
	Nonpriority Creditor's Name				
	POB 4485	When was the debt incurred? 8/2016			
	Beaverton, OR 97076 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	To all the same year may the same new capery			
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify Charge account			

Debtor	1 Jasmine D. Smith	Case number (if known)			
4.4					
4.1	Komyatte & Casbon PC	Last 4 digits of account number	\$191.00		
	Nonpriority Creditor's Name 9650 Gordon Dr	When was the debt incurred?			
	Highland, IN 46322 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify Collection account			
4.1	Midland Funding LLC		\$1,135.00		
5	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ1,133.00		
	2365 Northside Dr 300	When was the debt incurred? 12/2013			
	San Diego, CA 92108 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	□ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify Collection account			
4.1	Navy Federal Credit Un	Last 4 digits of account number	\$15,043.00		
6	Nonpriority Creditor's Name		410,010.00		
	POB 3700	When was the debt incurred? 5/2018			
	Merrifield, VA 22119 Number Street City State Zip Code	As of the date year file the plains in Check all that apply			
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:			
	At least one of the debtors and another	Student loans			
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify Credit Card			

Debtor	Jasmine D. Smith	Case number (if known)			
4.1	_				
7	Progressive	Last 4 digits of account number	\$2,061.09		
	Nonpriority Creditor's Name 256 West Data Dr. Draper, UT 84020	When was the debt incurred?			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	□ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify Deficiency Balance			
4.1	Pour Zen Pantistus		\$400.00		
8	Pure Zen Dentistry Nonpriority Creditor's Name	Last 4 digits of account number	\$489.80		
	POB 43	When was the debt incurred?			
	Greensburg, IN 47240				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims			
	<u> </u>	□ Debts to pension or profit-sharing plans, and other similar debts			
	■ No				
	Yes	■ Other. Specify Medical account collection			
4.1	Receivables Performanc	Last 4 digits of account number	\$157.00		
	Nonpriority Creditor's Name 20816 44th Ave West	When was the debt incurred?			
	Lynnwood, WA 98036 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneok all that apply			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	□ Student loans			
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts			
	□Yes	■ Other. Specify Collection account			

Debto	Jasmine D. Smith	Case number (if known)				
4.2						
0	SYNCB/Banana Republic	Last 4 digits of account number	\$672.00			
	Nonpriority Creditor's Name POB 965036	When was the debt incurred? 1/2012				
	Orlando, FL 32896	When was the debt incurred?				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts				
	_	_ Charge account				
	☐ Yes	Other. Specify charge off				
4.2	Trans Union Corp. (p)	Last 4 digits of account number	\$0.00			
<u>'</u>	Nonpriority Creditor's Name		<u> </u>			
	POB 2000	When was the debt incurred?				
	Chester, PA 19016 Number Street City State Zip Code	As of the date year file the plains in Charles II that such.				
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	_					
	Debtor 1 only	Contingent				
	Debtor 2 only	Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not				
	<u> </u>	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts				
	■ No					
	Yes	■ Other. Specify Notice only				
4.2 2	Trustmark Reecovery Se	Last 4 digits of account number	\$1,437.00			
	Nonpriority Creditor's Name	When we the debt in course d?				
	541 Otis Bowen Dr. Munster, IN 46321	When was the debt incurred?				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	□ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	□ Yes	■ Other. Specify Collection account				
		Caron, opening				

Debtor 1	Jasmine I	D. Smith		Case nu	ımber (if known)			
4.2	WestPort C	rossings Apa	Last 4 digits of account numb	or			\$1,298.00	
	Nonpriority Cred	ditor's Name	When was the debt incurred?				— 	
	Saint Ann, I			-				
		City State Zip Code :he debt? Check one.	As of the date you file, the cla	As of the date you file, the claim is: Check all that apply				
ı	Debtor 1 onl	y	☐ Contingent					
Debtor 2 only		☐ Unliquidated						
_	Debtor 1 and	•	☐ Disputed					
_		of the debtors and another	Type of NONPRIORITY unsec	ured claim:				
_	_	s claim is for a community	☐ Student loans					
	debt	s ciaini is for a community	Obligations arising out of a s	separation ag	reement or divorc	e that you did not		
l:	s the claim su	bject to offset?	report as priority claims					
ı	No		Debts to pension or profit-sh	aring plans,	and other similar o	lebts		
[☐ Yes		Other. Specify Deficien	cy Baland	e			
Part 3:	List Others	s to Be Notified About a Deb	ot That You Already Listed					
is trying have m	g to collect fro ore than one c	m you for a debt you owe to so	bout your bankruptcy, for a debt the meone else, list the original credito you listed in Parts 1 or 2, list the a r submit this page.	or in Parts 1	or 2, then list the	collection agency here. Sin	milarly, if you	
Name and			On which entry in Part 1 or Part 2 did	·	0			
	n Missouri Big Bend Ro		Line 4.1 of (Check one):			ority Unsecured Claims		
	ouis, MO 63		Part 2: Creditors with Nonpriority Unsecured Claims					
			ast 4 digits of account number					
Name and	d Address	(On which entry in Part 1 or Part 2 did	you list the o	riginal creditor?			
	Ed/Navien		ine 4.8 of (Check one):	·	•	ority Unsecured Claims		
	st. US Atty			Part 2: 0	Creditors with Nor	npriority Unsecured Claims		
1575 20		4						
Guirpoi	rt, MS 3950		_ast 4 digits of account number					
N				Part				
Name and Dept of	a Address · Ed/Navien		On which entry in Part 1 or Part 2 did you list the original creditor? ine 4.8 of (Check one): Depart 1: Creditors with Priority Unsecured Claims					
•	Atty South		Part 2: Creditors with Nonpriority Unsecured Claims					
	Court St Ste	••		Part 2: Creditors with Nonpriority Unsecured Claims				
Jackso	n, MS 3920							
		l .	_ast 4 digits of account number					
Name and			On which entry in Part 1 or Part 2 did	·	•			
-	Ed/Navien		_ine 4.8 of (Check one):			ority Unsecured Claims		
	y General l nnsylvania			Part 2: 0	Creditors with Nor	priority Unsecured Claims		
	gton, DC 2							
		I	ast 4 digits of account number					
Name and	d Address	(On which entry in Part 1 or Part 2 did	you list the o	riginal creditor?			
Direct TV		I	_ine 4.9 of (Check one):	☐ Part 1: 0	Creditors with Price	ority Unsecured Claims		
POB 105261				Part 2: 0	Creditors with Nor	priority Unsecured Claims		
Atlanta, GA 30348		ı	_ast 4 digits of account number					
Part 4:	Add the Ar	mounts for Each Type of Un	secured Claim					
	ne amounts of unsecured cla		ms. This information is for statistic	al reporting	purposes only. 2	28 U.S.C. §159. Add the amo	ounts for each	
					Tota	al Claim		
	6a.	Domestic support obligations		6a.	\$	0.00		
To clai	otal							
from Par		Taxes and certain other debts	you owe the government	6b.	\$	0.00		
	6c.	Claims for death or personal i	njury while you were intoxicated	6c.	\$	0.00		

Official Form 106 E/F

Debtor 1 _ J	otor 1 Jasmine D. Smith			Case number (if known)		
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00	
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00	
	01	0. 1. 11	01		al Claim	
Total claims		Student loans	6f.	\$	0.00	
rom Part 2		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00	
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00	
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	103,934.95	
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	103,934.95	

Fill in this information to identify your case:					
Debtor 1	Jasmine D. Smith				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI		
Case number					☐ Check if this is an
					amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Sprint P.O. Box 4600 Reston, VA 20195	2 year phone lease, began 1/2019.

Debtor 1	Jasmine D. Smith				
200101	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	inkruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI		
Case number _				С	Check if this is an amended filing
Official Fo Schedule	rm 106H H: Your Cod	ebtors			12/15
people are filing ill it out, and nu your name and c	together, both are equi mber the entries in the case number (if known)	ally responsible for supp	olying correct information the Additional Page to t	complete and accurate as pond. If more space is needed, on the top of any as a codebtor.	opy the Additional Page,
☐ No					
Yes					
		lived in a community pro Nevada, New Mexico, Pur		(Community property states a gron, and Wisconsin.)	and territories include
■ No. Go to	line 3.				
☐ Yes. Did y	your spouse, former spou	ise, or legal equivalent live	with you at the time?		
in line 2 aga	ain as a codebtor only it , Schedule E/F (Official	f that person is a guaran	tor or cosigner. Make su	your spouse is filing with your spouse is filing with youre you have listed the credit is. Use Schedule D, Schedul	or on Schedule D (Official
	n 1: Your codebtor lumber, Street, City, State and ZI	P Code		Column 2: The creditor to Check all schedules that ap	
226 A	kle Smith dams Ave i, MS 39531			■ Schedule D, line2 □ Schedule E/F, line □ Schedule G Navy Federal Credit Un	

Schedule H: Your Codebtors

Fill in this information	to identify your case:	
Debtor 1	Jasmine D. Smith	_
Debtor 2 (Spouse, if filing)		_
United States Bankru	ptcy Court for the: SOUTHERN DISTRICT OF MISSISSIPPI	_
Case number (If known)		Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date:
Official Form	<u>106l</u>	MM / DD/ YYYY
Schedule I:	Your Income	12/15
supplying correct infespouse. If you are se	accurate as possible. If two married people are filing together (Debto ormation. If you are married and not filing jointly, and your spouse is parated and your spouse is not filing with you, do not include inforn set to this form. On the top of any additional pages, write your name	s living with you, include information about your nation about your spouse. If more space is needed,

Describe Employment Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. Employed Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation **Substitute Teacher Electrician** Include part-time, seasonal, or Employer's name **Kelly Services USA LLC US Navy** self-employed work. **Employer's address** Occupation may include student 999 W Big Beaver Rd or homemaker, if it applies. Ste 601A Troy, MI 48084 Gulfport, MS 39501

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

2017

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2.

3. Estimate and list monthly overtime pay.

3.

4. Calculate gross Income. Add line 2 + line 3.

How long employed there?

filing spouse		For Deptor 1		
3,656.40	\$	1,007.50	\$	2.
0.00	+\$	0.00	+\$	3.
3,656.40	\$	1,007.50	\$	4.

For Dobtor 4 For Dobtor 2 or

10 years

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Jasmine D. Smith	_	Case	number (<i>if known</i>)			
				For	Debtor 1		Debtor 2 or	
	Con	y line 4 here	4.	\$	1,007.50	non-	-filing spouse 3,656.40	
	OOP.	y line 4 nere	٠.	Ψ_	1,007.30	Ψ	3,030.40	-
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	77.09	\$	0.00	_
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	_
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	\$	0.00	_
	5d. 5e.	Required repayments of retirement fund loans Insurance	5d. 5e.	\$_ \$	0.00	\$	0.00	_
	5e. 5f.	Domestic support obligations	5f.	\$ 	0.00	\$ 	0.00	=
	5g.	Union dues	5g.	\$_	0.00	\$	0.00	_
	5h.	Other deductions. Specify:	5h.+	• \$	0.00	+ \$	0.00	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	77.09	\$	0.00	
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	930.41	\$	3,656.40	-
8.	List	all other income regularly received:						-
	8a.	Net income from rental property and from operating a business,						
		profession, or farm Attach a statement for each property and business showing gross						
		receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	\$	0.00	_
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive						
		Include alimony, spousal support, child support, maintenance, divorce	0.0	¢	0.00	ď	0.00	
	8d.	settlement, and property settlement. Unemployment compensation	8c. 8d.	\$_ \$	0.00	\$	0.00	_
	8e.	Social Security	8e.	\$ —	0.00	\$ 	0.00	_
	8f.	Other government assistance that you regularly receive		*-	0.00	Ψ	0.00	-
		Include cash assistance and the value (if known) of any non-cash assistance)					
		that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.						
		Specify:	8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	 8g.	\$	0.00	\$	0.00	_
	8h.	Other monthly income. Specify: BAS & BAH	8h.+	• \$	0.00	+ \$	1,623.39	-
9.	۸۸۸	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	1,623.39	<u> </u>
Э.	Auu	an other meome. Add lines paroprocrourperprogram.	Э.	<u> </u>	0.00	Ψ	1,023.38	9
10	Calc	culate monthly income. Add line 7 + line 9.	10. \$		930.41 + \$	5.2	279.79 = \$	6,210.20
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.		930.41 · Ψ_	٥,٤	- Ψ _	0,210.20
11		e all other regular contributions to the expenses that you list in Schedule	, –					
		ide contributions from an unmarried partner, members of your household, your		dents,	your roommates	, and		
		r friends or relatives.		1	en e		\	
	Spec	not include any amounts already included in lines 2-10 or amounts that are not cify:	avallar	ие то р	ay expenses list	ea in S	11. + \$	0.00
	·							
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certa.						
	appli	,	III LIADI	iilies a	ind Related Data	, 11 11	12. \$	6,210.20
							Combir	ned
								y income
13.	Do y	ou expect an increase or decrease within the year after you file this form	?				·	
		No.						
		Yes. Explain:						

Fill	in this information to identify your case:				
Deb	otor 1 Jasmine D. Smith		Check	c if this is:	
			_	An amended filing	
	ouse, if filing)			A supplement show 3 expenses as of t	ring postpetition chapter the following date:
	,				
Unit	ed States Bankruptcy Court for the: SOUTHERN DISTRICT OF MISSI	SSIPPI	N	MM / DD / YYYY	
l	e number nown)				
,	,				
Of	fficial Form 106J				
Sc	chedule J: Your Expenses				12/15
Be info	as complete and accurate as possible. If two married people are primation. If more space is needed, attach another sheet to this funder (if known). Answer every question.				
Par					
1.	Is this a joint case?				
	■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household?				
	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses	for Separate House	hold of Debto	or 2.	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.	Son		1	Yes
		_		_	□ No
		Son		7	■ Yes
					□ No □ Yes
					☐ Yes
					☐ Yes
3.	Do your expenses include expenses of people other than				— 100
	yourself and your dependents?				
	t 2: Estimate Your Ongoing Monthly Expenses imate your expenses as of your bankruptcy filing date unless your	ou are using this fo	rm as a sur	nlement in a Cha	nter 13 case to report
exp	penses as of a date after the bankruptcy is filed. If this is a supplibilicable date.				
Inc	lude expenses paid for with non-cash government assistance if	you know			
	value of such assistance and have included it on Schedule I: Yoficial Form 106I.)	our Income		Your expe	enses
(011	inciai i omi root.)				
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	4. \$		1,254.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		0.00
_	4d. Homeowner's association or condominium dues		4d. \$		0.00
5.	Additional mortgage payments for your residence, such as hor	ne equity loans	5. \$		0.00

Debtor 1	Jasmine	D. Smith	Case num	ber (if known)	
6. Uti l	lities:				
6. U til 6a.		, heat, natural gas	6a.	\$	0.00
6b.		wer, garbage collection	6b.	·	0.00
6c.		e, cell phone, Internet, satellite, and cable services	6c.	·	255.00
6d.	•	ecify: Internet	6d.	· : ————	45.00
				*	
		ekeeping supplies :hildren's education costs	7. 8.	·	800.00
			o. 9.	\$	680.00
	-	ry, and dry cleaning		\$	125.00
	•	products and services	10.	·	100.00
		ntal expenses	11.	\$	100.00
		Include gas, maintenance, bus or train fare.	12.	\$	350.00
	not include ca	ar payments. clubs, recreation, newspapers, magazines, and bo		\$	
		ributions and religious donations	13. 14.	·	50.00 100.00
		ributions and religious donations	14.	\$	100.00
	urance.	nsurance deducted from your pay or included in lines 4	or 20		
	a. Life insura	, , ,	15a.	\$	0.00
	b. Health ins		15a. 15b.	·	0.00
	c. Vehicle in:		15c.	· : ————	267.20
		rance. Specify:	15d.	· -	
				Ψ	0.00
Spe	ecify:	clude taxes deducted from your pay or included in line	es 4 or 20. 16.	\$	0.00
		ease payments:	4=	•	
		ents for Vehicle 1	17a.	· -	535.00
		ents for Vehicle 2	17b.	·	0.00
		ecify: Wife's car note	17c.	·	593.00
		ecify: wife's revolving credit paymnt	17d.	\$	920.00
dec	ducted from	of alimony, maintenance, and support that you die your pay on line 5, Schedule I, Your Income (Offici	al Form 106l). 18.	\$	0.00
9. Oth	ner payments	s you make to support others who do not live with	you.	\$	0.00
Spe	ecify:		19.		
		erty expenses not included in lines 4 or 5 of this fo	rm or on Schedule I: Yo	our Income.	
		s on other property	20a.		0.00
20b	 Real estat 	re taxes	20b.		0.00
200	. Property, I	homeowner's, or renter's insurance	20c.	\$	0.00
200	d. Maintenar	nce, repair, and upkeep expenses	20d.	\$	0.00
20e	e. Homeown	er's association or condominium dues	20e.	\$	0.00
1. Ot h	ner: Specify:		21.	+\$	0.00
	•	monthly expenses			
	a. Add lines 4	· ·	_	\$	6,174.20
22b	o. Copy line 2	2 (monthly expenses for Debtor 2), if any, from Officia	Form 106J-2	\$	
220	c. Add line 22	a and 22b. The result is your monthly expenses.		\$	6,174.20
3. Cal	culate your	monthly net income.			
	•	12 (your combined monthly income) from Schedule I.	23a.	\$	6,210.20
		monthly expenses from line 22c above.	23b.	·	6,174.20
		• •			
230		our monthly expenses from your monthly income. is your <i>monthly net income</i> .	23c.	\$	36.00
			<u>.</u>		
		an increase or decrease in your expenses within the			
		ou expect to finish paying for your car loan within the year or d	o you expect your mortgage	payment to increase of	or decrease because of a
		terms of your mortgage?			
	No.				
	Yes.	Explain here:			

Fill in this inform	mation to identify your o	case:			
Debtor 1	Jasmine D. Smith				
Dahtar 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI		
Case number					
(if known)				☐ Check if this is an amended filing	
Official Forn	-	n Individual	Dobtor's Sob	odulos	
Declarat	ion About a	n maividuai	Debtor's Scho		15
obtaining money years, or both. 18		connection with a ban		aking a false statement, concealing property, or nes up to \$250,000, or imprisonment for up to 20	
Did you pay	y or agree to pay some	one who is NOT an atto	rney to help you fill out bank	kruptcy forms?	
■ No					
☐ Yes. N	Name of person			Attach Bankruptcy Petition Preparer's Notice Declaration, and Signature (Official Form 119)	
	Ity of perjury, I declare to the strue and correct.	that I have read the sum	nmary and schedules filed wi	rith this declaration and	
X /s/ Jası	mine D. Smith		X		
	ne D. Smith re of Debtor 1		Signature of Deb	btor 2	
Date N	March 13, 2019		Date		

	nation to identify you				
Debtor 1	Jasmine D. Smit First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	SOUTHERN DISTRICT C	DF MISSISSIPPI		
Case number _				_	Check if this is an
					g
Official Fo	rm 107				
Statement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/16
information. If m		attach a separate sheet to t		equally responsible for sup y additional pages, write you	
Part 1: Give I	Details About Your Ma	arital Status and Where You	Lived Before		
1. What is you	r current marital statu	ıs?			
■ Married					
☐ Not mai					
2. During the I	ast 3 years, have you	lived anywhere other than v	where you live now?		
□ No					
Yes. Lis	at all of the places you	lived in the last 3 years. Do no	ot include where you live nov	v.	
Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	ldress:	Dates Debtor 2 lived there
5090 W 20 Gary, IN 4		From-To: 2005 - 4/2018	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:
				nity property state or territory ico, Texas, Washington and W	
_	,	, ,	,	, ,	,
■ No □ Yes. Ma	ake sure vou fill out <i>Sc</i>	hedule H: Your Codebtors (Of	ficial Form 106H).		
	•	•			
Part 2 Explai	in the Sources of You	ır Income			
Fill in the tota	al amount of income yo	nployment or from operating ou received from all jobs and a have income that you receive	all businesses, including part		ndar years?
□ No					
Yes. Fil	I in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$1,135.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
Official Form 107		Statement of Financial Affa	airs for Individuals Filing for B	ankruptcy	page 1

De	btor 1 <u>Ja</u>	smine D. S	Smith				Cas	se number (if known)		
				Debtor 1				Debtor 2		
				Sources	of income that apply.		s income e deductions and iions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
	r last calen inuary 1 to	dar year: December	31, 2018)	■ Wages bonuses,	s, commissions, tips		\$11,342.00	☐ Wages, combonuses, tips	missions,	
				☐ Opera	ting a business			☐ Operating a	business	
5.	Include include and other winnings. List each s	come regard public bene If you are fil	dless of wheth fit payments; ing a joint cas the gross inco	ner that inco pensions; r se and you	ome is taxable. Exa ental income; intel have income that y	amples of rest; divid		alimony; child supp cted from lawsuits; only once under De	royalties; ar ebtor 1.	Security, unemployment, nd gambling and lottery
	— 103.	i iii iii uic de	ians.							
				Debtor 1 Sources Describe	of income below.	each	s income from source e deductions and sions)	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)
	□ No.	individual	primarily for a 90 days befo Go to line 7 List below 6	personal, for you filed for a constant for a consta	amily, or househo for bankruptcy, di or to whom you pai	ld purpos id you pa	e." y any creditor a tota of \$6,425* or more	al of \$6,425* or mo in one or more pay	re? rments and	01(8) as "incurred by an the total amount you
		* Subject	not include	payments t	o an attorney for the	his bankr				and alimony. Also, do t.
	■ Yes.				e primarily consu		ts. y any creditor a tota	al of \$600 or more?		
		■ No.	Go to line 7							
		☐ Yes		ments for d	omestic support o		of \$600 or more an s, such as child sup			at creditor. Do not include payments to an
	Creditor'	s Name and	d Address		Dates of payme	ent	Total amount paid	Amount you still owe	Was this	payment for
7.	Insiders in of which y	iclude your i ou are an of	elatives; any ficer, director	general par , person in	rtners; relatives of control, or owner of	any gene of 20% or		erships of which yo g securities; and ar	u are a gene ny managing	eral partner; corporations g agent, including one for
	■ No □ Yes.	List all payr	nents to an in	sider.						
	Insider's	Name and	Address		Dates of payme	ent	Total amount paid	Amount you still owe	Reason fo	or this payment

DCI	Juli Jasiiiile D. Jiiilli		Case	S Hulliber (II know	11)	
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost		ments or transfer a	ny property on	account of a d	ebt that benefited an
	■ No □ Yes. List all payments to an insider					
	☐ Yes. List all payments to an insider Insider's Name and Address	Dates of payment	Total amount	Amount you		this payment
			paid	still owe	Include cred	litor's name
Pai	t 4: Identify Legal Actions, Repossessio	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.					
	■ No □ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo		erty repossessed, fo	oreclosed, garn	iished, attached	d, seized, or levied?
	No. Go to line 11.Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property			е	Value of the property
		Explain what happened	d			ргорогту
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment bed No ☐ Yes. Fill in the details.		luding a bank or fin	ancial institutio	on, set off any a	amounts from your
	Creditor Name and Address	Describe the action the	creditor took	Dat take	e action was en	Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a		erty in the possessi	on of an assigr	nee for the bend	efit of creditors, a
	■ No □ Yes					
Pai	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup No	otcy, did you give any gift	s with a total value o	of more than \$6	600 per person	?
	☐ Yes. Fill in the details for each gift.					
	Gifts with a total value of more than \$600 per person	Describe the gifts			es you gave gifts	Value
	Person to Whom You Gave the Gift and Address:					
14.	Within 2 years before you filed for bankrup No		s or contributions w	vith a total valu	e of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or cor Gifts or contributions to charities that to		ı contributed	Dat	es you	Value
	more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)				atributed	
Par	t 6: List Certain Losses					

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

Del	otor 1 Jasmine D. Smith	Case	Case number (if known)					
	or gambling?							
	■ No							
	Yes. Fill in the details.							
	Describe the property you lost and	Describe any insurance coverage for the loss	Date of your	Value of property				
	how the loss occurred	Include the amount that insurance has paid. List programmer insurance claims on line 33 of Schedule A/B: Programmer and Include the amount that insurance has paid. List programmer and Include the amount that insurance has paid.		lost				
Par	t7: List Certain Payments or Transfer	rs						
16.	consulted about seeking bankruptcy or	uptcy, did you or anyone else acting on your bel preparing a bankruptcy petition? preparers, or credit counseling agencies for service		erty to anyone you				
	□ No							
	Yes. Fill in the details.							
	Person Who Was Paid	Description and value of any property	Date payment	Amount of				
	Address	transferred	or transfer was	payment				
	Email or website address Person Who Made the Payment, if Not	You	made					
	Jason Graeber	Attorney Fee		\$1,200.00				
	2496 Pass Rd	Court Filing Fee - \$335.00		. ,				
	Biloxi, MS 39531							
	www.jasongraeberlaw.com							
	Access Counseling 633 W 5th St. Ste 26001 Los Angeles, CA 90071 www.accessbk.org	Credit Counseling Course		\$11.95				
17.	promised to help you deal with your cree Do not include any payment or transfer tha	uptcy, did you or anyone else acting on your beleditors or to make payments to your creditors? at you listed on line 16.	half pay or transfer any prope	erty to anyone who				
	■ No □ Yes. Fill in the details.							
	Person Who Was Paid	Description and value of any property	Date payment	Amount of				
	Address	transferred	or transfer was made	payment				
18.	transferred in the ordinary course of yo	rs made as security (such as the granting of a secur						
	Person Who Received Transfer	Description and value of	Describe any property or	Date transfer was				
	Address	property transferred p	payments received or debts paid in exchange	made				
	Person's relationship to you							
19.	Within 10 years before you filed for band beneficiary? (These are often called assertion No	kruptcy, did you transfer any property to a self-set-protection devices.)	settled trust or similar device	of which you are a				
	☐ Yes. Fill in the details.							
	Name of trust	Description and value of the property	transferred	Date Transfer was made				

Debtor 1 Jasmine D. Smith Case number (if known) Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of Name of Financial Institution and Type of account or Last balance Date account was Address (Number, Street, City, State and ZIP account number instrument closed, sold, before closing or moved, or transfer transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, have it? State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Nο Yes. Fill in the details. Owner's Name Where is the property? Describe the property Value (Number, Street, City, State and ZIF Address (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it

ZIP Code)

19-50474-KMS Dkt 3 Filed 03/13/19 Entered 03/13/19 16:13:17 Page 33 of 52

Del	otor	Jasmine D. Smith		Cas	e number (if known)					
25.	Ha	ve you notified any governmental unit of	any release of hazardous material?							
	_	No								
		No Yes. Fill in the details.								
	Na	ame of site	Governmental unit		Environmental law, if you	Date of notice				
	A	ddress (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code)	ı	know it					
26.	Ha	ve you been a party in any judicial or ad	ministrative proceeding under any envir	ronm	nental law? Include settlements	and orders.				
		No								
	С, П	Yes. Fill in the details. ase Title	Court or agency	Nati	ure of the case	Status of the				
		ase Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nati	ure of the case	case				
Pai	t 11	Give Details About Your Business or	Connections to Any Business							
27.	Wi	thin 4 years before you filed for bankrup	tcv. did you own a business or have an	v of t	the following connections to an	v business?				
			in a trade, profession, or other activity,		_	,				
		<u> </u>	pany (LLC) or limited liability partnershi		-					
		☐ A partner in a partnership			,					
			vecutive of a cornoration							
		☐ An officer, director, or managing executive of a corporation☐ An owner of at least 5% of the voting or equity securities of a corporation								
	_									
	_	No. None of the above applies. Go to Part 12.								
		Yes. Check all that apply above and fill usiness Name	I in the details below for each business Describe the nature of the business		Employer Identification number	Ar.				
	A	ddress			Do not include Social Security					
	(NI	umber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Dates business existed					
28.		thin 2 years before you filed for bankrup	tcy, did you give a financial statement to	o an	yone about your business? Incl	ude all financial				
	ins	stitutions, creditors, or other parties.								
		No								
		Yes. Fill in the details below.								
		ame ddress	Date Issued							
	(N	umber, Street, City, State and ZIP Code)								
Pai	t 12	Sign Below								
are with	true a b	ead the answers on this <i>Statement of File</i> and correct. I understand that making a bankruptcy case can result in fines up to C. §§ 152, 1341, 1519, and 3571.	false statement, concealing property, o	or ob	taining money or property by fr					
/s/	Jas	smine D. Smith								
_		ne D. Smith ure of Debtor 1	Signature of Debtor 2							
Dat	e	March 13, 2019	Date							
Did ■ N	Ю	attach additional pages to Your Statem	ent of Financial Affairs for Individuals F	iling	for Bankruptcy (Official Form 1	07)?				
	-	ı pay or agree to pay someone who is no	t an attorney to help you fill out bankru	ptcy	forms?					
■ N		Name of Person Attach the Bankru	Intry Petition Prenarer's Notice Declaration	ים חו	nd Signature (Official Form 110)					
			nent of Financial Affairs for Individuals Filing			page 6				

19-50474-KMS Dkt 3 Filed 03/13/19 Entered 03/13/19 16:13:17 Page 34 of 52

Debtor 1	Jasmine D. Smith	Case number (if known)

Fill in this information	n to identify your of			
Fill in this informatio		ise:		
	asmine D. Smith	Middle Name	Last Name	
Debtor 2 (Spouse if, filing) Fin	rst Name	Middle Name	Last Name	
United States Bankrup	otcy Court for the		RICT OF MISSISSIPPI	
Officed States Barikrup	otey Court for the.	OCC TILITION	KIOT OF MIGGIOGRAFI	
Case number				☐ Check if this is an
				amended filing
Official Form	108			
Statement of	of Intention	for Indivi	iduals Filing Under Chapte	e r 7 12/15
			<u> </u>	
If you are an individua	•		out this form if:	
■ creditors have clai■ you have leased personal content of the content of the			t expired	
You must file this form	m with the court wit s earlier, unless the	hin 30 days after y	you file your bankruptcy petition or by the date se time for cause. You must also send copies to the	
If two married people sign and da		n a joint case, both	n are equally responsible for supplying correct in	formation. Both debtors must
	ccurate as possible ame and case numb		needed, attach a separate sheet to this form. On	the top of any additional pages,
Part 1: List Your C	reditors Who Have	Secured Claims		
			On the second to December 11	(Official Forms 400D) (Illing the
information below.			Creditors Who Have Claims Secured by Property	
Identify the creditor	and the property tha	t is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's Navy	Federal Credit Un		☐ Surrender the property.	■ No
name:			Retain the property and redeem it.	_ 140
Description of 20	17 Jeep Grand Ch	erokee	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
	,001 miles		Retain the property and [explain]:	
securing debt:			Surrender to Co-Debtor	_
Part 2: List Your U	nexpired Personal I	Property Leases		
For any unexpired pe in the information bel	rsonal property leas ow. Do not list real	e that you listed in	n Schedule G: Executory Contracts and Unexpire xpired leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(p)(2)	e lease period has not yet ended.
Describe your unexp	ired personal prope	rty leases		Will the lease be assumed?
Lessor's name:	Sprint			□ No
Ecosor s name.	Эргин			□ No
				Yes
Description of leased Property:	2 year phone le	ase, began 1/201	9.	
Part 3: Sign Below	1			

Official Form 108

19-50474-KMS Dkt 3 Filed 03/13/19 Entered 03/13/19 16:13:17 Page 36 of 52

Debt	tor 1 <u> </u>	Jasmine D. Smith	Case number (if known)
	•	ty of perjury, I declare that I have indic t is subject to an unexpired lease.	ated my intention about any property of my estate that secures a debt and any personal
X	/s/ Jasmine D. Smith		X
	Jasmine D. Smith		Signature of Debtor 2
	Signature of Debtor 1		
	Date	March 13, 2019	Date

Fill in	this information to identify your case:					rected	in this form and	in Form
Debto	or 1 Jasmine D. Smith		12:	2A-1Su _l	op:			
Debto	or 2 			□ 1. Tr	ere is no presi	umption	of abuse	
` '	d States Bankruptcy Court for the: Southern District o	f Mississinni					•	mption of abuse
Ormo	Council Danistapley Court for the.	i wilooloolppi			oplies will be maranties of the market policy in the market policy in the policy in the market policy in the market policy in the policy in th		der Chapter 7	Means Test
Case (if know	number				,		,	
(.,						ot apply now be but it could ap	
				☐ Che	ck if this is a	n amer	nded filing	
Offi	cial Form 122A - 1						J	
	apter 7 Statement of Your Cur	rent Moi	nthly Inc	ome	2			12/15
-	ptor / Otatomont or roar our		itiliy iiic					12/13
attach case n	complete and accurate as possible. If two married people as a separate sheet to this form. Include the line number to wumber (if known). If you believe that you are exempted fror ing military service, complete and file Statement of Exempter Calculate Your Current Monthly Income	hich the addition n a presumption	nal information a of abuse becau	applies. Ise you d	On the top of ar lo not have prin	ny additi narily co	onal pages, writ	te your name and or because of
1. \	What is your marital and filing status? Check one on	ly.						
l	□ Not married. Fill out Column A, lines 2-11.							
l	☐ Married and your spouse is filing with you. Fill ou	t both Columns	A and B, lines	2-11.				
l	Married and your spouse is NOT filing with you.	fou and your	spouse are:					
	■ Living in the same household and are not lega	lly separated.	Fill out both Co	lumns A	and B, lines 2	2-11.		
	Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are le living apart for reasons that do not include evading	egally separated	d under nonbar	kruptcy	law that applie	s or tha		
101 the	in the average monthly income that you received from all s (10A). For example, if you are filing on September 15, the 6-m 6 months, add the income for all 6 months and divide the total uses own the same rental property, put the income from that p	onth period would by 6. Fill in the re	be March 1 throsult. Do not include	ugh Augu de any in	ust 31. If the amo	unt of your	our monthly incomonce. For examp	ne varied during ble, if both
				Colum Debto			nn B or 2 or iling spouse	
	Your gross wages, salary, tips, bonuses, overtime, a payroll deductions).	and commission	ons (before all	\$	601.95	\$	3,656.40	
	Alimony and maintenance payments. Do not include Column B is filled in.	payments from	a spouse if	\$	0.00	\$	0.00	
f a	All amounts from any source which are regularly pa of you or your dependents, including child support. from an unmarried partner, members of your household and roommates. Include regular contributions from a sp iilled in. Do not include payments you listed on line 3.	Include regular , your depende	r contributions nts, parents,	\$	0.00	\$	0.00	
5. I	Net income from operating a business, profession,	or farm			_			
			otor 1					
į .	Gross receipts (before all deductions)	\$ <u>0.00</u> -\$ <u>0.00</u>						
	Ordinary and necessary operating expenses		Copy here ->	¢	0.00	\$	0.00	
	Net monthly income from a business, profession, or farr Net income from rental and other real property	n\$	Copy liele ->	Ψ	0.00	Ψ	0.00	
6. I	vet income from rental and other real property	Dek	otor 1					
(Gross receipts (before all deductions)	\$ 0.00						
	Ordinary and necessary operating expenses	-\$ 0.00						
	Net monthly income from rental or other real property	\$ 0.00	Copy here ->	\$	0.00	\$	0.00	
	nterest, dividends, and royalties			\$	0.00	\$	0.00	

Official Form 122A-1

				Column A Debtor 1		Column E Debtor 2 non-filing		
8.	Unemployment compensation			\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the amoun the Social Security Act. Instead, list it here:	t received was a bene	fit under	·		·		
	For you \$	0.	00					
	For your spouse \$		00					
9.	Pension or retirement income. Do not include any ar benefit under the Social Security Act.	nount received that wa	ıs a	\$	0.00	\$	0.00	
10.	Income from all other sources not listed above. Specific points and benefits received under the Social Species as a victim of a war crime, a crime against hurdomestic terrorism. If necessary, list other sources on a total below.	Security Act or paymer manity, or internationa	nts I or					
	BAS & BAh			\$	0.00	\$	1,623.39	
				\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00	
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the to		\$	601.95	+ \$_	5,279.79	= \$_	5,881.74
Part	2: Determine Whether the Means Test Applies t	to You					Total incon	current monthly ne
12.	Calculate your current monthly income for the year	. Follow these steps:	,					
	12a. Copy your total current monthly income from line	•		Cor	y line 11	here=>	\$	5,881.74
	Tea. Gopy your total ourion morning moonie non mile	· ·			,		Ψ	3,001.74
	Multiply by 12 (the number of months in a year)						X	12
	12b. The result is your annual income for this part of th	e form				1:	2b. \$	70,580.88
13.	Calculate the median family income that applies to	you. Follow these step	os:					
	Fill in the state in which you live.	MS						
	Fill in the number of people in your household.	4						
	Fill in the median family income for your state and size	of household.				1;	3. \$	65,138.00
	To find a list of applicable median income amounts, go for this form. This list may also be available at the bank		pecified	in the separ	ate instru			
14.	How do the lines compare?							
	14a. Line 12b is less than or equal to line 13. C Go to Part 3.	on the top of page 1, ch	neck box	1, There is	no presui	mption of ab	use.	
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2	, The pr	esumption o	f abuse is	determined	by Form 1	22A-2.
Part	3: Sign Below							
	By signing here, I declare under penalty of perjury	that the information o	n this sta	atement and	l in any at	tachments is	true and o	correct.
	V /o/ leamine D Smith							
	X /s/ Jasmine D. Smith Jasmine D. Smith Signature of Debtor 1							
	Date March 13, 2019							
	MM / DD / YYYY							
	If you checked line 14a, do NOT fill out or file Form	m 122A-2.						
	If you checked line 14b, fill out Form 122A-2 and t	file it with this form.						

Jasmine D. Smith

Fill in this information to identify your case:							
Debtor 1	Jasmine D. Smith						
Debtor 2 (Spouse, if filing)						
United States Ba	ankruptcy Court for the:	Southern District of Mississippi					
Case number (if known)							

Check the appropri	ate box as directed in
lines 40 or 42:	

According to the calculations required by this Statement:

- 1. There is no presumption of abuse.
- \square 2. There is a presumption of abuse.
- ☐ Check if this is an amended filing

Official Form 122A - 2

Chapter 7 Means Test Calculation

04/16

To fill out this form, you will need your completed copy of Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Copy your total current monthly income. Copy line 11 f	om Offic	ial Form 122/	A-1 here=>	\$_		5,881.74
Did you fill out Column B in Part 1 of Form 122A-1?						
□ No. Fill in \$0 for the total on line 3.						
■ Yes. Is your spouse Filing with you?						
■ No. Go to line 3.						
☐ Yes. Fill in \$0 the total on line 3.						
On line 11, Column B of Form 122A–1, was any amount of the income you rexpenses of you or your dependents? No. Fill in 0 for the total on line 3. Yes. Fill in the information below: State each purpose for which the income was used		, ,	,	used for	r the hou	sehold
expenses of you or your dependents? No. Fill in 0 for the total on line 3.	Fill i	r your spouse n the amoun subtracting fi r spouse's in	t you	used for	r the hou	sehold
expenses of you or your dependents? No. Fill in 0 for the total on line 3. Yes. Fill in the information below: State each purpose for which the income was used For example, the income is used to pay your spouse's tax debt or to	Fill i	n the amoun	t you	used for	r the hou	sehold
expenses of you or your dependents? No. Fill in 0 for the total on line 3. Yes. Fill in the information below: State each purpose for which the income was used For example, the income is used to pay your spouse's tax debt or to support other than you or your dependents.	Fill i	n the amoun subtracting fi r spouse's in	t you	used for	r the hou	sehold
expenses of you or your dependents? No. Fill in 0 for the total on line 3. Yes. Fill in the information below: State each purpose for which the income was used For example, the income is used to pay your spouse's tax debt or to support other than you or your dependents. wife's car note	Fill i are you	n the amoun subtracting for spouse's in 593.00	t you	used for	r the hou	sehold
expenses of you or your dependents? No. Fill in 0 for the total on line 3. Yes. Fill in the information below: State each purpose for which the income was used For example, the income is used to pay your spouse's tax debt or to support other than you or your dependents. wife's car note wife's revolving credit payments	Fill i are s your	n the amoun subtracting for spouse's in 593.00 920.00	t you			

Official Form 122A-2

art 2	Calculate Your Deductions from Your Income						
to a	e Internal Revenue Service (IRS) issues National and L Inswer the questions in lines 6-15. To find the IRS star tructions for this form. This information may also be a	ndards, go online	using the link specified in the separate				
you	duct the expense amounts set out in lines 6-15 regardless r actual expenses if they are higher than the standards. Dome in line 3 and do not deduct any operating expenses the	o not deduct any ar	nounts that you subtracted fro your spouse's				
If yo	our expenses differ from month to month, enter the averag	ge expense.					
Wh	enever this part of the from refers to you, it means both yo	ou and your spouse	if Column B of Form 122A-1 is filled in.				
5.	. The number of people used in determining your deductions from income						
	Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.						
Nat	ional Standards You must use the IRS National	I Standards to answ	er the questions in lines 6-7.				
6.7.	Standards, fill in the dollar amount for food, clothing, and other items. \$ 1,694.00						
Pec	ople who are under 65 years of age						
	7a. Out-of-pocket health care allowance per person	\$52					
	7b. Number of people who are under 65	X4					
	7c. Subtotal. Multiply line 7a by line 7b.	\$ 208.00	Copy here=> \$				
Pec	ople who are 65 years of age or older						
	7d. Out-of-pocket health care allowance per person	\$114					
	7e. Number of people who are 65 or older	X0					
	7f. Subtotal. Multiply line 7d by line 7e.	\$0.00	Copy here=> +\$				
	7g. Total. Add line 7c and line 7f		\$ 208.00 Copy total here=> \$ 208.00				

Jasmine D. Smith

LOC	ai Sta	andards Y	ou mus	st use the	HINO LOCA	ai Standa	rus to ans	wer the que	estions i	(1) III	ies a	8-15.							
		n informatio tcy purpose				Trustee	Program	has divide	ed the IF	RSI	_oca	al Stand	lard f	or ho	using 1	for			
_		ing and utili			-	_	•												
To a	nsw	er the quest	ions ir	n lines 8	-9, use the	e U.S. Tr	ustee Pro	gram char	rt.										
		e chart, go o t may also be						instruction	s for this	for	m.								
З.		sing and ut e dollar amo					•				•	. ,			,	fill \$		64	46.00
9.	Hou	sing and ut	ilities -	· Mortga	ge or rent	expense	es:												
	9a.	Using the ni listed for yo												\$	1,12	4.00			
	9b.	Total average	ge mor	nthly payı	ment for a	ll mortgaç	ges and of	ther debts s	secured	by y	our	home.							
		To calculate contractuall for bankrup	y due t	o each s	ecured cre														
		Name of the	e credit	tor				Average in payment	monthly										
		-NONE-						\$											
				Total a	verage mo	onthly pay	yment	\$	0.0	00		Copy nere=>	-\$			0.00	Repeat th amount or line 33a.		
	9c.	Net mortgag	ge or re	ent exper	nse.														
		Subtract line or rent expe										\$	1	,124.		Copy here=>	. \$	1,12	24.00
10.		ou claim that cts the calc											ıg is	incorr	ect an	d	\$		0.00
	Ex	plain why:																	
11.	Loc	al transport	ation e	expenses	: Check tl	he numbe	er of vehic	cles for which	ch you cl	laim	n an	ownersh	nip or	opera	iting ex	pense.			
). Go to line 1	14.																
	□ 1	. Go to line 1	12.																
	2 2	or more. Go	to line	12.															
12.		icle operation icle operation of the contraction of															\$	39	92.00

Jasmine D. Smith

13.	You ma	e ownership or lease expense: Using the IRS Local ay not claim the expense if you do not make any loan of the two vehicles.	Standards, calculate the or lease payments on the	e net ownership o e vehicle. In addi	r lease e tion, you	xpense for each vehi may not claim the ex	cle below. opense for
Ve	hicle 1	Describe Vehicle 1: 2017 Jeep Grand Cherc	okee 32,001 miles				
13a.	Owners	ship or leasing costs using IRS Local Standard		\$	0.00		
13b	•	pe monthly payment for all debts secured by Vehicle 1. include costs for leased vehicles.					
	are cor	culate the average monthly payment here and on line 1 ntractually due to each secured creditor in the 60 mont ptcy. Then divide by 60.		t			
	N	ame of each creditor for Vehicle 1	Average monthly payment				
	-N	NONE-	\$				
				7			
		Total Average Monthly Payment	\$	Copy here => -\$	0	Repeat this amount on line 33b.	
13c.		hicle 1 ownership or lease expense ct line 13b from line 13a. if this amount is less than \$0,	enter \$0	\$	0.00	Copy net Vehicle 1 expense here => \$	0.00
Ve	hicle 2	Describe Vehicle 2:					
13d	Owners	ship or leasing costs using IRS Local Standard		\$	0.00		
13e.		ge monthly payment for all debts secured by Vehicle 2. vehicles.	Do not include costs for				
	N	ame of each creditor for Vehicle 2	Average monthly payment				
	-1	NONE-	\$				
				7.0			
		Total Average Monthly Payment	\$	Copy here => -\$	0.0	Repeat this amount on line 33c.	
13f.		hicle 2 ownership or lease expense ct line 13e from line 13d. if this amount is less than \$0,	enter \$0	\$	0.00	Copy net Vehicle 2 expense here => \$	0.00
14.		transportation expense: If you claimed 0 vehicles in portation expense allowance regardless of whether you			ill in the	Public \$	0.00
15.	also de	onal public transportation expense: If you claimed 1 educt a public transportation expense, you may fill in w im more than the IRS Local Standard for <i>Public Transp</i>	hat you believe is the ap				0.00

Jasmine D. Smith

Other Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories. 16. Taxes: The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes. self-employment taxes, Social Security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. 71.67 Do not include real estate, sales, or use taxes. 17. Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. 0.00 Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. 18. Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than 0.00 term. 19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. 0.00 Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. 20. Education: The total monthly amount that you pay for education that is either required: as a condition for your job, or 0.00 for your physically or mentally challenged dependent child if no public education is available for similar services. 21. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. 680.00 Do not include payments for any elementary or secondary school education. 22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. 0.00 Payments for health insurance or health savings accounts should be listed only in line 25. 23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment 0.00 expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted. 4,815.67 24. Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23.

Jasmine D. Smith

Additional Expense Deductions These are additional deductions allowed by the Means Test. Note: Do not include any expense allowances listed in lines 6-24. 25. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents. Health insurance 0.00 Disability insurance 0.00 0.00 Health savings account 0.00 0.00 Total Copy total here=> Do you actually spend this total amount? No. How much do you actually spend? \$ 26. Continued contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may 0.00 include contributions to an account of a qualified ABLE program. 26 U.S.C.§ 529A(b). 27. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply. 0.00 By law, the court must keep the nature of these expenses confidential. Additional home energy costs. Your home energy costs are included in your insurance and operating expenses on If you believe that you have home energy costs that are more than the home energy costs included in expenses on line 8, then fill in the excess amount of home energy costs. You must give your case trustee documentation of your actual expenses, and you must show that the additional 0.00 amount claimed is reasonable and necessary. Education expenses for dependent children who are younger than 18. The monthly expenses (not more than \$160.42* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school. You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23. 0.00 * Subject to adjustment on 4/01/19, and every 3 years after that for cases begun on or after the date of adjustment. 30. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards. To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. 0.00 You must show that the additional amount claimed is reasonable and necessary. 31. Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial 100.00 instruments to a religious or charitable organization. 26 U.S.C. § 170(c)(1)-(2). 100.00 32. Add all of the additional expense deductions. \$ Add lines 25 through 31.

Jasmine D. Smith

	ctions for Debt Payment							
	or debts that are secured by an intere ans, and other secured debt, fill in lir	est in property that you own, including I	home mo	rtgages, ve	hicle			
To	·	yment, add all amounts that are contractu	ally due to	each secu	red			
0.	Mortgages on your home:	24					Average paymen	monthly
33a.	Copy line 9b here						\$	0.00
	Loans on your first two vehicles:					-	·	
3b.	•					=> :	\$	0.00
33c.							\$	0.00
33d.	List other secured debts:							
Name	of each creditor for other secured debt	Identify property that secures the debt	t	inclu	paymer de taxes ance?			
					No			
	-NONE-			_	Yes	,	\$	
					100	•	Ψ	
					No			
				_ □	Yes	;	\$	
					No			
				_	Yes	+3	\$	
-						¬ ''	Ψ	
						Copy		
33e.	Total average monthly payment. Add lin	nes 33a through 33d	\$		0.00	here=	-> \$_	0.00
OI	other property necessary for your so	secured by your primary residence, a vupport or the support of your depender	nts?					
		sion of your property (called the cure amo						
	listed in line 33, to keep posses Next, divide by 60 and fill in the	sion of your property (called the <i>cure amo</i> information below.		Total cu	ıre		Mor	thly cure
	listed in line 33, to keep posses	sion of your property (called the cure amo		Total cu			Mor	nthly cure ount
	listed in line 33, to keep posses Next, divide by 60 and fill in the e of the creditor	sion of your property (called the <i>cure amo</i> information below.				÷ 60 =	amo	
Name	listed in line 33, to keep posses Next, divide by 60 and fill in the e of the creditor	sion of your property (called the <i>cure amo</i> information below.		amount		÷ 60 =	amo	
Name	listed in line 33, to keep posses Next, divide by 60 and fill in the e of the creditor	ision of your property (called the cure amo information below. Identify property that secures the debt		amount		÷ 60 =	\$	
Name -NO	listed in line 33, to keep posses Next, divide by 60 and fill in the e of the creditor NE- o you owe any priority claims such as	information below. Identify property that secures the debt s a priority tax, child support, or alimon	Total \$	amount		Copy	\$	ount
Namo	listed in line 33, to keep posses Next, divide by 60 and fill in the e of the creditor NE- o you owe any priority claims such as e past due as of the filing date of you	information below. Identify property that secures the debt s a priority tax, child support, or alimon	Total \$	amount		Copy	\$	ount
Name -NO 35. De	listed in line 33, to keep posses Next, divide by 60 and fill in the e of the creditor NE- o you owe any priority claims such as the past due as of the filing date of you No. Go to line 36.	Identify property that secures the debt s a priority tax, child support, or alimon bankruptcy case? 11 U.S.C. § 507.	Total \$	amount		Copy	\$	ount

Jasmine D. Smith

For more	eligible to file a case under Chapter 13? 11 U.S.C. § information, go online using the link for <i>Bankruptcy Bas</i> ins for this form. <i>Bankruptcy Basics</i> may also be available.	s <i>ics</i> speci				
■ No.	Go to line 37.					
☐ Yes.	Fill in the following information.					
	Projected monthly plan payment if you were filing under	r Chapte	er 13	\$		
	Current multiplier for your district as stated on the list is Administrative Office of the United States Courts (for d and North Carolina) or by the Executive Office for Unite (for all other districts).	istricts in	Alabama	x		
	To find a list of district multipliers that includes your dis the link specified in the separate instructions for this fo be available at the bankruptcy clerk's office.				Сору	total
	Average monthly administrative expense if you were fil	ing unde	r Chapter 13	\$	here=	
	of the deductions for debt payment. es 33e through 36.					\$
Total Deduc	tions from Income					
38. Add all d	of the allowed deductions.					
	ne 24, All of the expenses allowed under IRS e allowances	\$	4,815.67	7		
Copy lir	ne 32, All of the additional expense deductions	\$	100.00	<u>)</u>		
Copy lir	ne 37, All of the deductions for debt payment	+\$	0.00	<u> </u>		
	Total deductions	\$	4,915.67	Copy total	I here=>	\$ 4,915.67
Part 3: De	termine Whether There is a Presumption of Abuse					
39. Calculat	e monthly disposable income for 60 months					
39a. Co	ppy line 4, adjusted current monthly income	\$	3,137.30	<u>)</u>		
39b. Co	py line 38, <i>Total deductions</i>	-\$	4,915.67	7		
	onthly disposable income. 11 U.S.C. § 707(b)(2). obtract line 39b from line 39a	\$	-1,778.37	Copy here=>\$		778.37
For the	next 60 months (5 years)				x 60	
39d. To	otal. Multiply line 39c by 60		s <u>-</u>	106,702.20	Copy here=>	\$106,702.20_
40. Find out	whether there is a presumption of abuse. Check the	box that	applies:			
■ The	line 39d is less than \$7,700*. On the top of page 1 of the	nis form, o	check box 1, Th	ere is no presu	umption of abu	se. Go to Part 5.
☐ The I	line 39d is more than \$12,850*. On the top of page 1 of 4 if you claim special circumstances. Go to Part 5.					
☐ The I	line 39d is at least \$7,700*, but not more than \$12,850 to adjustment on 4/01/19, and every 3 years after that for			the date of adju	ustment.	

Jasmine D. Smith

Debtor 1	Jasr	nine D. Smith	Case number (if known)	
41.	41a.	Fill in the amount of your total nonpriority unsecured debt. If you filled a Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form.	41a. \$ x .25	
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(i)		\$
		Multiply line 41a by 0.25		
25	% of y	ne whether the income you have left over after subtracting all allowed do your unsecured, nonpriority debt. e box that applies:	eductions is enough to pay	
		39d is less than line 41b. On the top of page 1 of this form, check box 1, <i>Th</i> p Part 5.	ere is no presumption of abuse.	
		39d is equal to or more than line 41b. On the top of page 1 of this form, chamption of abuse. You may fill out Part 4 if you claim special circumstances. T		
Part 4:	Giv	ve Details About Special Circumstances		
		we any special circumstances that justify additional expenses or adjustn	nents of current monthly income for	which there is no
reas	onable	e alternative? 11 U.S.C. § 707(b)(2)(B).		
	lo. Go	o to Part 5.		
□ Y		I in the following information. All figures should reflect your average monthly ϵ m. You may include expenses you listed in line 25.	expense or income adjustment for each	ch .
	ne	ou must give a detailed explanation of the special circumstances that make the cessary and reasonable. You must also give your case trustee documentation justments.		
	G	Sive a detailed explanation of the special circumstances	Average monthly expense or income adjustment	
			\$	
			\$	
			\$	
			\$	
Part 5:	_	In Below gning here, I declare under penalty of perjury that the information on this state	ament and in any attachments is true	and correct
	-		ement and in any attachments is true of	and correct.
		/ Jasmine D. Smith		
C -	7	gnature of Debtor 1		
Da		arch 13, 2019 M / DD / YYYY		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of Mississippi

		ern District of Mississip	•		
In re	Jasmine D. Smith	Debtor(s)	Case No. Chapter	7	_
		Decitor(s)	Chapter	· · · · · · · · · · · · · · · · · · ·	
	DISCLOSURE OF COMPEN	NSATION OF ATTOR	RNEY FOR DE	CBTOR(S)	
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to)
	For legal services, I have agreed to accept		\$	1,200.00	
	Prior to the filing of this statement I have received			1,200.00	
	Balance Due			0.00	
2. 7	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. 7	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed comp	ensation with any other person	unless they are mem	bers and associates of my law fir	m.
	☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the narrows.				
5.	In return for the above-disclosed fee, I have agreed to re	nder legal service for all aspect	s of the bankruptcy c	ase, including:	
t c	 Analysis of the debtor's financial situation, and rende Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of credite [Other provisions as needed] 	ement of affairs and plan which	may be required;		
5. I	By agreement with the debtor(s), the above-disclosed fee	e does not include the following	service:		
		CERTIFICATION			
	certify that the foregoing is a complete statement of any ankruptcy proceeding.		payment to me for re	epresentation of the debtor(s) in	
М	arch 13, 2019	/s/ Jason Graeber	r		
Date		Jason Graeber 10 Signature of Attorne			
		Jason Graeber	y		
		2496 Pass Rd.			
		Biloxi, MS 39531 228-207-7117 Fa	x· 228-207-8634		
		_Jason@jasongra			
		Name of law firm	·		